**BAKER BOTTS LLP**

**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☐ Declaration Submitted with Initial Filing
OR
☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number A36066

First Named Inventor Stefan Schneidewind

COMPLETE IF KNOWN

Application Number 10/699,121

Filing Date October 31, 2003

Group Art Unit 2858

Examiner Name (Not Yet Assigned)

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**METHOD AND APPARATUS FOR TESTING MOVEMENT-SENSITIVE
SUBSTRATES**

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) **10/31/2003** as United States Application Number or PCT International

Application Number **10/699,121** and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
102 51 377.5	GERMANY	11/01/2002	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
102 58 375.7	GERMANY	12/12/2002	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

DECLARATION — Utility or Design Patent Application**Claim for Benefit of Prior U.S. Provisional Application(s)**

I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below:

Provisional Application Number	Filing Date

Claim for Benefit of Earlier U.S./PCT Application(s) under 35 U.S.C. 120

(complete this part only if this is a divisional, continuation or C-I-P application)

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior application(s) in the manner provided by the first paragraph of Title 35, United States Code § 112, I acknowledge the duty to disclose information as defined in Title 37, Code of Federal Regulations, Section 1.56 which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:

Application Number	Filing Date	Status (patented, pending, abandoned)

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: ☒Customer Number
or Bar Code Label

21003

OR ☒

Correspondence address below

Name

Address

City

State

ZIP

Country

Telephone

Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR :

☐

A petition has been filed for this unsigned inventor

STEFAN
Given Name
(first and middle (if any))

SCHNEIDEWIND
Family Name
or Surname

Inventor's
Signature

Date

REICHENBERG
Residence: City

State

GERMANY
Country

GERMANY
Citizenship

AM FELD 7
Mailing Address

REICHENBERG
City

State

01468
ZIP

GERMANY
Country

NAME OF SECOND INVENTOR:

☐

A petition has been filed for this unsigned inventor

CLAUS
Given Name
(first and middle (if any))

DIETRICH
Family Name
or Surname

Inventor's
Signature

Date

SACKA
Residence: City

State

GERMANY
Country

GERMANY
Citizenship

TAUSCHAER STRASSE 19
Mailing Address

SACKA
City

State

01561
ZIP

GERMANY
Country

☐ Additional inventors are being named on the _____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.



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Please type a plus sign (+) inside this box → ☐

DECLARATION		ADDITIONAL INVENTOR(S) Supplemental Sheet Page ____ of ____	
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
JORG		KIESEWETTER	
Inventor's Signature <i>J. Kiese</i>		Date <i>15. Jan. 04</i>	
DRESDEN Residence: City	State	GERMANY Country	GERMANY Citizenship
GOHRENER WEG 27/601 Mailing Address			
Mailing Address			
DRESDEN City	State	01109 ZIP	GERMANY Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
FRANK-MICHAEL		WERNER	
Inventor's Signature <i>Frank-Michael Werner</i>		Date <i>13 Jan. 2004</i>	
DRESDEN Residence: City	State	GERMANY Country	GERMANY Citizenship
BULGAKOWSTRASSE 28 Mailing Address			
Mailing Address			
DRESDEN City	State	01217 ZIP	GERMANY Country
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address			
City	State	ZIP	Country

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**POWER OF ATTORNEY OR
AUTHORIZATION OF AGENT**

Application Number	10/699,121
Filing Date	October 31, 2003
First Named Inventor	Stefan Schneidewind
Group Art Unit	2858
Examiner Name	(Not Yet Assigned)
Attorney Docket Number	A36066

I hereby appoint:

☒ Practitioners at Customer Number

21003 →

Place Customer
Number Bar Code
Label here☐ Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☒ The above-mentioned Customer Number.

OR

☐ Firm or
Individual Name

Address

Address

City

State

Zip

Country

Telephone

Fax

I am the:

☒ Applicant/Inventor.☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).**SIGNATURE of Applicant or Assignee of Record**

Name

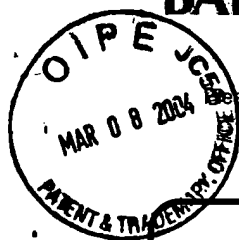
STEFAN SCHNEIDEWIND

Signature

Date

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐ *Total of _____ forms are submitted.



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SIGNATURE of Applicant or Assignee of Record

Name

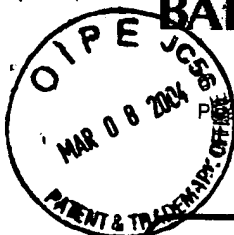
CLAUS DIETRICH

Signature

Date

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Name

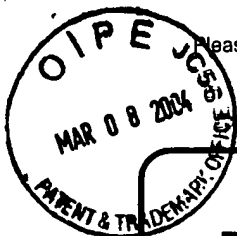
JORG KIESEWETTER

Signature

Date

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SIGNATURE of Applicant or Assignee of Record

Name

FRANK-MICHAEL WERNER

Signature

Date

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☐ *Total of _____ forms are submitted.